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Bib Data Sheet

CONFIRMATION NO. 9692

|                             |                                       |              |                        |                                    |
|-----------------------------|---------------------------------------|--------------|------------------------|------------------------------------|
| SERIAL NUMBER<br>09/963,655 | FILING DATE<br>09/27/2001<br><br>RULE | CLASS<br>370 | GROUP ART UNIT<br>2664 | ATTORNEY DOCKET NO.<br>03493.00308 |
|-----------------------------|---------------------------------------|--------------|------------------------|------------------------------------|

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## \*\* CONTINUING DATA \*\*\*\*\*

This application is a CON of 09/001,417 12/31/1997 PAT 6,424,646

*yes B.P*\*\* FOREIGN APPLICATIONS \*\*\*\*\* *None B.P*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 10/19/2001

| Foreign Priority claimed        | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no | STATE OR<br>COUNTRY                  | SHEETS<br>DRAWING | TOTAL<br>CLAIMS | INDEPENDENT<br>CLAIMS |
|---------------------------------|---|--------------------------------------|-------------------|-----------------|-----------------------|
| 35 USC 119 (a-d) conditions met | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no | Met after<br>Allowance<br><i>B.P</i> | 13                | 27              | 3                     |
| Verified and Acknowledged       | Examiner's Signature <i>B.P</i>                                     | Initials                             |                   |                 |                       |

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## TITLE

Integrated services director (ISD) overall architecture

|            |   |  |
|------------|---|--|
| FILING FEE | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees<br><br><input type="checkbox"/> 1.16 Fees ( Filing )<br><br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) |
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